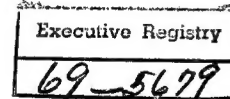


SECRET



DD/S 69-4605

14 NOV 1969

MEMORANDUM FOR: Executive Director-Comptroller

SUBJECT : Inspector General's Survey of the  
Office of Medical Services



REFERENCE : (a) Memo dtd 26 Sept 68 to DD/S frm Ex.Dir.-Compt.  
same subject

(b) Memo dtd 10 Oct 68 to Ex.Dir.-Compt. frm DD/S  
same subject

1. This memorandum responds to your request in reference (a) for a brief report on the effectiveness of the new follow-up procedure for the executive annual examinations.

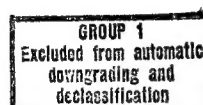
2. The following developments in follow-up procedures have occurred:

a. Significant improvement during the past year in follow-up procedures has been achieved through expanding the WAE time and concentrating the services of one experienced WAE Medical Officer on executive annual examinations. During FY-1969, 711 executive annual examinations were performed and in all cases the examinee was informed by the examiner of the findings.

b. Of the 711 examined, 298 cases (42%) were found to have significant abnormalities, 224 of which (75%) were of types for which medical treatment or management was indicated. Each of these 224 was enjoined to consult his private physician; in those instances where the examinee had no private physician, the examiner assisted with appropriate referral.

c. Of 224 cases recommended for referral, follow-up medical information indicating consultation as recommended was received and entered in the OMS medical chart in 56 instances (25%).

SECRET



**SECRET**

**SUBJECT: Inspector General's Survey of the Office of Medical Services**

3. In referring cases for private consultation, employees are advised that OMS would like indications of action subsequently taken. We do not, however, insist on follow-up reports in connection with this particular program because such reports relate to the private relationship between the employee and his physician. (In this respect the program is to be distinguished of course from other types of examinations performed in connection with various personnel actions, e.g., overseas assignment. In this latter type, the employee requiring consultation is referred by OMS and at Agency expense; a report from the consultant is always received in such cases.)

4. We shall continue to suggest and request such reports, and in certain cases we shall assure ourselves as we do now that the follow-up action has or will be taken. A further check-point comes at the time of the employee's next executive annual examination on which occasion we review with him the previous condition which was the basis for referral and assess this condition anew. We believe this provides a practical, ethical and medically sound means of follow-up action.



K. L. Bannerman  
Deputy Director  
for Support

Atts: References (a) & (b)

**SECRET**

<b>TRANSMITTAL SLIP</b>		DATE
TO: Executive Director-Comptroller		
ROOM NO. 7D-59	BUILDING Hq	
REMARKS:		
<p>FROM: Deputy Director for Support</p> <p>ROOM NO. BUILDING EXTENSION</p> <p>Ref - File (47)</p>		

FORM NO. 241  
1 FEB 55

REPLACES FORM 36-8  
WHICH MAY BE USED.

SECRET

68-3360/3

26 SEP 1968

DD/S 68 4870

MEMORANDUM FOR: Deputy Director for Support

SUBJECT : Inspector General's Survey of the Office  
of Medical Services

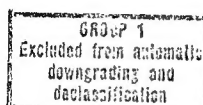
1. I have reviewed your response to the Inspector General's Survey of the Office of Medical Services and noted that you agree with the thrust of the report, nonconcurring in only Recommendation No. 13. This recommendation would place the responsibility on the Director of Medical Services for determining which geographic areas should require physical examinations of dependents before going overseas. Your proposal that OMS take the initiative with the area divisions of the Clandestine Services in bringing the present system up to date should satisfy the intent of this recommendation.

2. You requested deferment on Recommendations 5, 6, and 7. No. 5 recommended that the positions of Personnel Officer and Finance Officer, now occupied by OMS careerists, be filled by DD/S personnel. Nos. 6 and 7 recommended the consolidation of several OMS activities into a Selection Processing Division and a Medical Services Division. I concur in your request for deferment.

3. Recommendation No. 9 recommended that the Director of Medical Services develop procedures for follow-up action on the executive annual examination. You stated that OMS would improve the present follow-up procedures. I concur with your approach.



SECRET



SECRET



6. Please inform me of your action on Recommendations 5, 6, 7, and 14 by 1 December 1968 and please prepare a brief report by 1 October 1969 on the effectiveness of the new follow-up procedure for the executive annual examinations.

/s/ L. K. White

L. K. White  
Executive Director-Comptroller

265 51 2 58 11.92

SECRET

**SECRET**

168-3360/4

DD/S 68-5082


10 OCT 1968

MEMORANDUM FOR: Executive Director-Comptroller

SUBJECT : Inspector General's Survey of the  
Office of Medical Services

REFERENCE : Memo dtd 26 Sept 68 for DD/S fr ExDir-Compt,  
same subj

In reference memorandum you replied to proposed action on the Inspector General's recommendations and established reporting dates for further action on certain recommendations. Regarding the effectiveness of the new follow-up procedures for executive annual examinations, the Director of Medical Services misinterpreted your deadline of 1 October 1969 to be 1 October 1968 and submitted the attached report. It simply shows that follow-up procedures are currently in effect and will serve to meet the essence of the IG recommendations. A report will be submitted on 1 October 1969.

  
R. L. Bannerman  
Deputy Director  
for Support

Att: Memo dtd 4 Oct 68 for DD/S  
fr D/OMS, same subj

cc : D/MS

*Noted.  
What we are really  
interested in here is the  
effectiveness of the follow-up  
procedures - I assume some months  
will be required to evaluate.*

**SECRET**

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

  
10/14/68